

Washington, D.C. 20549

RODE SID DON

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

| 143/74 | <u> </u> |
|----------------------------------|-----------|
| OMB APPRO | VAL |
| OMB Number: | 3235-0076 |
| Expires: April Estimated average | 30,2008 |
| Estimated average | burden |
| hours per response | e 16.00 |

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| Prefix | | Serial |
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| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment | |
|--|---|
| | |
| A. BASIC IDENTIFICATION DATA | |
| 1. Enter the information requested about the issuer | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) | 00044072 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) Brief Description of Business (Sumber and Street, City, State, Zip Code) Brief Description of Business | nber (Including Area Code) 6 43 1728 mber (Including Area Code) PROCESSED |
| Development and distribution of food products | APR 1 1:2008 |
| Type of Business Organization corporation | THOMSON FINANCIAL Libity Company |
| Actual or Estimated Date of Incorporation or Organization: | |
| GENERAL INSTRUCTIONS | |
| Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 (77d(6)). | |
| When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deem and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received which it is due, on the date it was mailed by United States registered or certified mail to that address. | ed filed with the U.S. Securities at that address after the date on |
| Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. | |
| Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copie photocopies of the manually signed copy or bear typed or printed signatures. | |
| Information Required: A new filing must contain all information requested. Amendments need only report the name of the ithereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and I not be filed with the SEC. | issuer and offering, any changes B. Part E and the Appendix need |
| Filing Fee: There is no federal filing fee. | |
| State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrate to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to this notice and must be completed. | strator in each state where sales a fee in the proper amount shall |
| ATTENTION — | |

filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Director General and/or Tieneficial Owner Managing Partner (Number and Street, City, State, Zip Code) Executive Officer □ Director General and/or Beneficial Owner Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer Director General and/or Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Director General and/or Beneficial Owner Executive Officer Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Director General and/or Promoter Beneficial Owner Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Director General and/or Executive Officer Promoter Beneficial Owner Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address General and/or ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

| -2.4 | . , - | | | | B. IN | FORMAŤI | ON ABOU | OFFERI | ۱G . | * | | , , | . , |
|---|---|-------------|-----------------|-------------|--------------|--|---------------------------------|---------------|---------------|--------------------|---|-----------------|-------------|
| 1 Hoc | . Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | | | | | | | | | Yes T | No F | | |
| 1. 1145 | Answer also in Appendix, Column 2, if filing under ULOE. | | | | | | | | | L | | | |
| 2. Wha | ıt is t | he minim | ım investm | | | oted from a | | | | | | s <u>50</u> | 0,000 |
| | Does the offering permit joint ownership of a single unit? | | | | | | | | | Yes | No / | | |
| | | | | | | | | | | | | | |
| 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. | | | | | | | | | | | | | |
| Full Nam | ie (L | ast name i | first, if indi | vidual) | | | | | | | | | |
| Business | or R | esidence | Address (N | umber and | Street, Ci | ty, State, Z | ip Code) | | | | | | |
| Name of | Asso | ociated Br | oker or Dea | aler | | <u>. </u> | | | . | – – – | | | |
| <u> </u> | 3376 | ah Davasa | Listed Use | Solicited | or Intende | to Solicit I | urchasers | · | | | | | <u> </u> |
| | | | | | | | | | | | | ☐ All | States |
| | _ | | | | | | | | | FL | (GA) | — [Ħ] | [D] |
| AL | = | AK IN | [AZ] | [AR] | [CA] [KY] | CO LA | CT ME | DE MD | DC MA | MI | MN | MS | MO |
| MT | _ | NE | NV | NH | NJ | NM | NY | NC | ND | OH | OK) | OR | PA |
| RI | Ī | SC | SD | TN | TX | UT | VT | VA | WA | WV | WI | \overline{WY} | PR |
| Full Nan | ne (I | ast name | first, if ind | ividual) | | | ·- | | | | | | |
| Business | s or | Residence | : Address (1 | Number an | d Street, C | City, State, | Zip Code) | | | | | | |
| Name of | Ass | ociated Bi | oker or De | aler | | | | | _ | | | | |
| States in | Wh | ich Persor | Listed Ha | s Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| (Ch | eck ' | "All State: | s" or check | individual | States) | | | \\ | | | | | l States |
| AL | 7 | AK | AZ | ÄR | ČA | CO | CT | DE | DC | FL | GA | III | ID |
| TL | _ | IN | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS] | MO |
| <u>M</u> 7 | - | NE | NV) | NH | NJ | MM. UT | NY VT | NC (VA) | ND WA | OH WV | OK WI | OR WY | PR |
| RI | | SC. | SD | TN | [TX] | (01) | <u> </u> | (<u>V</u> A) | <u>(1771)</u> | | | | |
| | | | first, if ind | | | | | | | | | | |
| Busines | s or | Residence | e Address (| Number ar | d Street, (| City, State, | Zip Code) | | | | | | |
| Name o | f Ass | ociated B | roker or De | ealer | | | | | | | | | |
| States in | n Wh | ich Perso | n Listed Ha | s Solicited | l or Intend | s to Solicit | Purchaser | S | | | · · · · | | |
| (Cł | neck | "All State | s" or check | individua | l States) | | ******************************* | | , | | *************************************** | . 🗌 A | Il States |
| A | | [AK] | $A\overline{Z}$ | AR | CA | CO | CT | DE | DC | FL | GA | HI | ID |
| ĪĬ | | [IN] | IA | KS | KY | LA | ME | MD | MA | MI OH | MN OK | MS OR | MO PA |
| M R | | NE SC | [NV] [SD] | NH TN | NJ TX | NM UT | NY VT | NC VA | ND WA | WV | WI | WY | PR |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| | already exchanged. | Aggregate | Amount Already |
|----|---|---------------------|--|
| | Type of Security | Offering Price | Sold |
| | Debt | s | s |
| | Equity | s | S |
| | ☐ Common ☐ Preferred | | |
| | Convertible Securities (including warrants) | s | s |
| | Partnership Interests | \$ | \$ |
| | Other (Specify /mited liability membership units | s <i>500,000</i> | s 500,000 |
| | Total | | s 0.00 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | 500,000 | 500,000 |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | : | Aggregate |
| | | Number Investors | Dollar Amount of Purchases |
| | Accredited Investors | / | s <u>500,000</u> |
| | Non-accredited Investors | | \$ |
| | Total (for filings under Rule 504 only) | | \$ |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | s E | |
| | Type of Offering | Type of Security | Dollar Amount Sold |
| | Rule 505 | | 2 |
| | Regulation A | | \$ |
| | Rule 504 | | \$ |
| | Total | · | \$_0.00 |
| 4 | a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure i not known, furnish an estimate and check the box to the left of the estimate. | ·. s | |
| | Transfer Agent's Fees | |] \$ |
| | Printing and Engraving Costs | |] \$ |
| | Legal Fees | | y s <u>2,000 </u> |
| | | r" | 7 °C |
| | Accounting Fees | | |
| | Engineering Fees | | s |
| | | [| \$ \$ \$ |

| | b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer." | ; | s 498,000 |
|----------|--|---|---|
| 5. | Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. | i | |
| | | Payments to Officers, Directors, & Affiliates | Payments to Others |
| | Salaries and fees | \$ | . 🗆 \$ |
| | Purchase of real estate | s | \$ |
| | Purchase, rental or leasing and installation of machinery | | |
| | and equipment | | |
| | Construction or leasing of plant buildings and facilities | s | . 🗆 \$ |
| | Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) | □\$ | □\$ |
| | Repayment of indebtedness | | |
| | Repayment of indebtedness | | DX 498 000 |
| | Working capital | | |
| | Other (specify): | L | - U |
| | | | \$ |
| | Column Totals | <u>0.00</u> | PS-900 498, 000 |
| | Total Payments Listed (column totals added) | <u> </u> | 00 498,000 |
| | D. FEDERAL SIGNATURE | | |
| sia | ne issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice to be signed by the issuer to furnish to the U.S. Securities and Exchange Comm e information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of | ission, upon writt | ule 505, the following en request of its staff, |
| | Kemper Foods International LLC Viella Descrip | Date 3-3/ | -08 |
| Na // | ame of Signer (Print or Type) Title of Signer (Print or Type) Nichael V. Kenner, Step. Title of Signer (Print or Type) Member and C.E. | <u> </u> | |
| | ' 'member | | |
| | and CFD | | |
| | (*F() | | |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

- ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| , | E. STATE SIGNATURE | | |
|----|--|-----|---------|
| 1. | Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? | Yes | No D |
| | See Appendix, Column 5, for state response. | | |

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| Issuer (Print or Type) | Signature | Date |
|---------------------------------|-----------------------|---------|
| Kemper Foods International, LLC | Wales V. Menry | 3.31.08 |
| Name (Print or Type) | Title (Print or Type) | |
| Michael V. Kemper | Member and CEO | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| | | | | AF | PENDIX | | | • | ., , , |
|-------|----------|--|--|--|---------|--|----------|--|----------|
| 1 | to non-a | to sell ccredited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | Type of investor and amount purchased in State (Part C-Item 2) | | | | 5 Disqualification under State ULC (if yes, attach explanation of waiver granted (Part E-Item 1) | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| AL | | | | | _ | | | | |
| AK | | | | | | | | | |
| AZ | | | | | | | | | |
| AR | | | | | | | | | |
| CA | : | | | | | | | | |
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| GA | | | \$500,000 | | | | | 1 | |
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| IA | | | , , | <u> </u> | | | | | <u> </u> |
| KS | | | | | | | | | |
| KY | | W. | Limited Liability Alterbergico Units | / | 570,000 | Ø | | | |
| LA | | | #300,000 | | | | | | |
| ME | | | | | | | | <u> </u> | <u> </u> |
| MD | | | | | | | | | |
| MA | | | | | | | <u> </u> | | |
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| MN | | | - | | | | | | |
| MS | | | | | | | | | |

| APPENDIX | | | | | | | | | | |
|----------|---|--|--|--------------------------------------|-----------|---|----------|--|--|--|
| 1 | Intend to non-a investor | to sell ccredited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | amount pu | 4 Tinvestor and rchased in State C-Item 2) | | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No | |
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| MT | | | | | | | | manda orgáni della pro- | | |
| NE | | | | | | | | | | |
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| VT | | | | <u> </u> | | | | | | |
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| WA | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | - | | | | | | <u> </u> | <u> </u> | |
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| - A | | | | APPI | ENDIX | | | ** | `, <i>.</i> `` |
|-------|-------------------|---|--|--------------------------------------|--|--|--------|--|-------------------------------------|
| 1 | | 2 | 3 Type of security | | 5 Disqualification under State ULOE (if yes, attach | | | | |
| | to non-a investor | to sell accredited is in State I-Item 1) | and aggregate offering price offered in state (Part C-Item 1) | | Type of investor and amount purchased in State (Part C-Item 2) | | | | ation of granted) -Item 1) |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| WY | | | | | | | | | |
| PR | | | | | | | | Ay an eastern in a with relation William | and the second second second second |

